FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATES
PUBLIC RECORDS

16 AUG 17 PM 12: 28

| 1. NAME OF COMMITTEE (in | TYPE OR PRII full) | NT ▼ | Example: If typing, over the lines. | type 12FE4M5 | |
|---|------------------------------------|---|-------------------------------------|-----------------------------|---------------------------------|
| CAMPAIGN FOR | DWIGHT YOUNG U.S | . SENATE | 1 1 1 1 1 1 1 | <u> </u> | |
| <u>[</u> | 1 1 1 1 1 1 1 1 1 1 | 1 | | | |
| ADDRESS (number ar | nd street) | 5724 | | | |
| Check if difthan previous reported. (A | usty I CLEARWA | TER | | F.L 3 | 3,76,5 |
| 2. FEC IDENTIFIC | CATION NUMBER V | CITY 4 | \ | STATE A | ZIP CODE ▲ |
| C 0 0 6 | 2 1 6 6 4 | 3. IS THIS REPORT | NEW (N) | OR AMENDE | STATE ▼ DISTRICT |
| | PORT (Choose One) | (b) 12-Day P | RE-Election Report | for the: | |
| (a) Quarterly R | eports: 5 Quarterly Report (Q1) | | Primary (12P) | General (12 | Runoff (12R) |
| | Quarterly Report (Q2) | | Convention (120 | C) Special (12 | S) |
| Octobe | r 15 Quarterly Report (Q3) | Election | on 0 8 | 3 0 2 0 1 6 | in the FL |
| January | 31 Year-End Report (YE) | (c) 30-Day F | OST-Election Repor | | |
| Termina To | ation Report (TER) | Election | General (30G) on | Runoff (30F | in the State of |
| © ₹ Covering Period | M M / D D D O 1 | ' 2 0 1 6 | through | M M / D 0 / 0.8 1.0 | 2.0.1.6 |
| | examined this Report and | | knowledge and bel | ief it is true, correct and | complete. |
| Dype or Print Name I O I O Signature of Treasure | H- | NE DIXON | | Date 0 8 | ' 1 1 ' 2 0 1 6 |
| in | | lete information m | ay subject the person | | penalties of 52 U.S.C. §30109. |
| Office Use Only | | | | | FEC FORM 3 (Revised 02/2003) |

SUMMARY PAGE

of Receipts and Disbursements

Page 2

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name CAMPAIGN FOR DWIGHT YOUNG U.S. SENATE Report Covering the Period: From: **COLUMN A** COLUMN B **Election Cycle-to-Date** This Period Net Contributions (other than loans) Total Contributions (other than loans) (from Line 11(e)) ... Total Contribution Refunds (from Line 20(d)) .. (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))... Net Operating Expenditures Total Operating Expenditures (from Line 17) .. Total Offsets to Operating 3 6 4 8 Expenditures (from Line 14)... Net Operating Expenditures 1 6 2 1 9 4 (subtract Line 7(b) from Line 7(a))... Cash on Hand at Close of Reporting Period (from Line 27)... Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .. 10ភី Debts and Obligations Owed BY M the Committee (Itemize all on Schedule C and/or Schedule D) .. P 0200 For further information contact: Federal Election Commission Ø 999 E Street, NW 7 Washington, DC 20463 1608 Toll Free 800-424-9530 Local 202-694-1100

FE6AN023

DETAILED SUMMARY PAGE

of Receipts

| FEC Form 3 (Revised 12/2003) | or neceipts | Page 3 |
|---|--|------------------------------------|
| Write or Type Committee Name | | |
| CAMPAIGN FOR DWIGHT YOUNG U.S. S | FNATE | |
| | | |
| Report Covering the Period: From: 0.7 | ' 0 1 ' 2 0 1 6 To | o: 0.8 1.0 2.0.1.6 |
| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other ThanPolitical Committees(i) Itemized (use Schedule A) | 75 | |
| (ii) Unitemized (iii) TOTAL of contributions from individuals . | <u>,,1.9.9.4.9</u> ,,1.9.9.4.9 | |
| (b) Political Party Committees(c) Other Political Committees(such as PACs) | 3 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - | |
| (d) The Candidate | 1, 9, 9, 4, 9 | |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | |
| 13. LOANS: (a) Made or Guaranteed by the Candidate | <u>,, 1.8.,0.0.0.0.0.0</u> | |
| (b) All Other Loans (c) TOTAL LOANS (add Lines 13(a) and (b)) | <u>, 1 8, 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 </u> | |
| OFFSETS TO OPERATING EXPENDITURES Return of deposit (Refunds, Rebates, etc.) | , , <u>, 3 6 4 8 4</u> | |
| 15 OTHER RECEIPTS (Dividends, Interest, etc.) | | 0 0 |
| 16? TOTAL RECEIPTS (add Lines → 11(e), 12, 13(c), 14, and 15) ⇔ (Carry Total to Line 24, page 4) | 1 8 5 6 4 3 3 | |
| 2016 | | |

FE6AN023

DETAILED SUMMARY PAGE of Disbursements FEC Form 3 (Revised 02/2003) Page 4 **COLUMN A COLUMN B** II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 17. OPERATING EXPENDITURES... 18. TRANSFERS TO OTHER **AUTHORIZED COMMITTEES...** 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate... (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))... 20. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees... (b) Political Party Committees... (c) Other Political Committees (such as PACs) ... (d) . TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))... 21. OTHER DISBURSEMENTS ... 22. TOTAL DISBURSEMENTS 6 5 8 4 3 1 (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY CASH ON HAND AT BEGINNING OF REPORTING PERIOD ... TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)... SUBTOTAL (add Line 23 and Line 24)... N TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)... @7. CASH ON HAND AT CLOSE OF REPORTING PERIOD 1 9 8 0 0

9

0

(subtract Line 26 from Line 25)...

| S | CHEDULE A (FEC Form 3) | | FOR LINE NUMBER: PAGE 1 OF 2 |
|-------------------|--|--|---|
| ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the | (check only one) |
| 11 | EMIZED RECEIPTS | Detailed Summary Page | 11a 11b 11c 11d 11d 12 X 13a 13b 14 15 |
| Α | ny information copied from such Reports and Statements n | person for the purpose of soliciting contributions | |
| 0 | for commercial purposes, other than using the name and | e to solicit contributions from such committee. | |
| | NAME OF COMMITTEE (In Full) | | |
| | CAMPAIGN FOR DWIGHT YOUNG U.S. SENA | TE | |
| _ | Full Name (Last, First, Middle Initial) | | |
| A. | DWIGHT MARK ANTHONY YOUNG | | Date of Receipt |
| | Mailing Address 2008 SUNSET GROVE LN | 0.5 2.7 2.0 1.6 | |
| | City State | Zip Code | 0 5 2 7 2 0 1 6 |
| | CLEARWATER FL | 33765 | |
| | FEC ID number of contributing | | Amount of Each Bossist this Desired |
| | federal political committee. | A | Amount of Each Receipt this Period |
| | Name of Employer Occupation | | 2,0,0,0,0 |
| | PINELLAS CTY SHERIFF OFFICE DETENT | TON DEPUTY | |
| | | ycle-to-Date ▼ | Memo Item |
| | X Primary General Other (specify) ▼ | | |
| | □ Other (specify) ▼ | | |
| | Full Name (Last, First, Middle Initial) | | |
| В. | | | Date of Receipt |
| | Mailing Address | | 0.6 1.5 2.0.1.6 |
| | 2008 SUNSET GROVE LN City State | Zip Code | 0.6 1.5 2.0.1.6 |
| | CLEARWATER FL | 33765 | |
| | FEC ID number of contributing | | 1 |
| | federal political committee. | | Amount of Each Receipt this Period |
| | Name of Employer Occupation | <u> </u> | 1 1 0 0 0 0 0 |
| | UNEMPLOYED UNEMPL | .OYED | |
| | Receipt For: Election C | ycle-to-Date _ | Memo Item |
| | X Primary General | | |
| | Other (specify) ▼ | | |
| _ | Full Name (Last, First, Middle Initial) | | |
| C. | DWIGHT MARK ANTHONY YOUNG | | Date of Receipt |
| ത | Mailing Address | | Mam / Dag / Ascacad |
| ব | 2008 SUNSET GROVE LN City State | Zip Code | 0.7 1.9 2,0,1.6 |
| Ω W | CLEARWATER FL | 33765 | |
| ব | FEC ID number of contributing | | |
| W | federal political committee. | | Amount of Each Receipt this Period |
| 0 | Name of Employer Occupation | · | 50000 |
| \ \(\text{Q}\) | UNEMPLOYED UNEMP | | |
| Ö | | /cle-to-Date | Memo Item |
| Ø | X Primary General | | |
| ~ ~ | Other (specify) ▼ | | |
| ⊕ | | | |
| do | SUBTOTAL of Receipts This Page (optional) | | 1 3 5 0 0 0 0 |
| # <u>`</u> | The state of the s | | |
| Ψ, | OTAL This Period (last page this line number only) | • | |

| SCHEDULE A (FEC Form 3) | Use separate schedule(s) | FOR LINE NUMBER: PAGE 2 OF 2 (check only one) |
|--|--|--|
| ITEMIZED RECEIPTS | for each category of the Detailed Summary Page | 11a 11b 11c 11d 12 X 13a 13b 14 15 |
| Any information copied from such Reports and Statements n or for commercial purposes, other than using the name and | person for the purpose of soliciting contributions | |
| NAME OF COMMITTEE (In Full) CAMPAIGN FOR DWIGHT YOUNG U.S. SENA | TE | |
| Full Name (Last, First, Middle Initial) A. DWIGHT MARK ANTHONY YOUNG Mailing Address 2008 SUNSET GROVE LN City State CLEARWATER FL FEC ID number of contributing federal political committee. | Zip Code 33765 | Date of Receipt 0 7 2 0 2 0 1 6 Amount of Each Receipt this Period |
| Name of Employer UNEMPLOYED Receipt For: ☐ Primary ☐ General Other (specify) ▼ Occupation UNEMPl Election C | | 5 0 0 0 0 Memo Item |
| B. DWIGHT MARK ANTHONY YOUNG Mailing Address 2008 SUNSET GROVE LN City State CLEARWATER FL | Zip Code | Date of Receipt 0.7 2.6 2.0.1.6 |
| FEC ID number of contributing federal political committee. Name of Employer UNEMPLOYED Receipt For: X Primary Other (specify) C C C C C C C C C C C C C C | | Amount of Each Receipt this Period 2 0 0 0 0 0 Memo Item |
| Full Name (Last, First, Middle Initial) C. DWIGHT MARK ANTHONY YOUNG Mailing Address 2008 SUNSET GROVE LN City State CLEARWATER FL | Zip Code 33765 | Date of Receipt 0.8 0.1 2.0.1.6 |
| FEC ID number of contributing federal political committee. Name of Employer UNEMPLOYED Receipt For: Primary Other (specify) | | Amount of Each Receipt this Period 2 0 0 0 0 0 Memo Item |
| SUBTOTAL of Receipts This Page (optional) | | 4 5 0 0 0 0 1 8 6 0 0 0 0 |

| IT | CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 1 OF 3 (check only one) X 17 |
|--------------|--|---|--|
| Ar or | ly information copied from such Reports and Statements me for commercial purposes, other than using the name and | nay not be sold or used by any address of any political committed. | person for the purpose of soliciting contributions tee to solicit contributions from such committee. |
| Λ | NAME OF COMMITTEE (In Full) | | |
| | CAMPAIGN FOR DWIGHT YOUNG U.S. SENA | TE | |
| | Full Name (Last, First, Middle Initial) | | |
| A. | FLORIDA DEPARTMENT OF STATE | | Date of Disbursement |
| | Mailing Address 500 SOUTH BRONOUGH ST | | 0 6 2 1 2 0 1 6 |
| | City State | Zip Code | Amount of Each Disbursement this Period |
| | TALLAHASSEE FL Purpose of Disbursement | 32399 | 1 0 4 4 0 0 0 |
| | CANDIDATE QUALIFICATION FEE FOR U.S. S | ENATE | |
| | Candidate Name | Category | Memo Item |
| | DWIGHT MARY ANTHONY YOUNG | Туре | |
| | Office Sought: House Disbursement For | · — | |
| | X Senate X Primary President Other (s | General pecify) ▼ | |
| | State: FL District: | (poony) \ | |
| | Full Name (Last, First, Middle Initial) | | |
| В. | | | Date of Disbursement |
| | IMAGING SUCCESS, LLC | | Mam / Dad / Aadada |
| | Mailing Address | | 0.7 0.1 2.0.1.6 |
| | PO BOX 10532 City State | Zip Code | Amount of Each Disbursement this Period |
| | NEWBURGH NY | 12550 | Amount of Each Disbursement this Feriod |
| | Purpose of Disbursement | | 2,5,0,0,0 |
| | CAMAPAIGN CONSULTATION STRATEGIST | | |
| | Candidate Name | Category | Memo Item |
| | DWIGHT MARK ANTHONY YOUNG Office Sought: House Disbursement For | r. Type | _ |
| | Sonato | | |
| | | specify) ▼ | |
| | State: FL District: | • | |
| | Full Name (Last, First, Middle Initial) | | |
| C. | SELEM MEDIA GROUP | | Date of Disbursement |
| Ň | Mailing Address | | $\begin{array}{c ccccccccccccccccccccccccccccccccccc$ |
| W) | 5211 W. LAUREL STREET City State Z | ip Code | Annual of Fine District No. 10. |
| 46 | | 3607 | Amount of Each Disbursement this Period |
| M | Purpose of Disbursement | | 1 3 6 8 0 0 |
| © | MEDIA ADVERTISMENT | | |
| 0 | Candidate Name | Category | / Memo Item |
| (N | DWIGHT MARK ANTHONY YOUNG | Type | |
| (<u>0</u>) | Office Sought: House Disbursement Fo | | |
| | X Senate | LJ | |
| ∞ | State: District: | · " \ | |
| P | | | |
| 4 | SUBTOTAL of Disbursements This Page (optional) | | 1 2 0 5 8 0 0 |

TOTAL This Period (last page this line number only).....

| | SCHEDULE B (FEC Form 3) | Use separate schedule(s) | FOR LINE NUMBER: PAGE 2 OF 3 (check only one) |
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| 1 | TEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | X 17 18 19a 19a |
| Г | | | 20a 20b 20c 21 |
| | Any information copied from such Reports and Statements more for commercial purposes, other than using the name and a | ray not be sold or used by any address of any political committed | y person for the purpose of soliciting contributions |
| Z | NAME OF COMMITTEE (In Full) | accided of any political commit | titee to solicit contributions from such committee. |
| | CAMPAIGN FOR DWIGHT YOUNG U.S. SENA | TE | |
| Ľ | Full Name (Last, First, Middle Initial) | | |
| A | CAMPAIGNPRO - VICTORYSTORE.COM | | Date of Disbursement |
| | Mailing Address | · · · · · · · · · · · · · · · · · · · | $\begin{array}{c ccccccccccccccccccccccccccccccccccc$ |
| | <u>5200 SW 30TH ST</u> City State | Zip Code | |
| | <u>DAVENPORT</u> IA | 52802 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement CAMPAIGN BROCHURE/FLYER | | 5 2 5 0 0 |
| | Candidate Name | | J |
| | DWIGHT MARY ANTHONY YOUNG | Category Type | // Memo Item |
| | Office Sought: House Disbursement For: | | |
| | X Senate X Primary | General | |
| | State: FL District: Other (sp | pecity) 🔻 | |
| | Full Name (Last, First, Middle Initial) | | |
| В. | MIAMI MEDIA MASS | | Date of Disbursement |
| | Mailing Address | 0.7 2.8 2.0.1.6 | |
| | 7510 SW 98 CT City State | Zin Code | |
| | MIAMI FL | Zip Code 33173 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement | 00170 | 3,0,0,0,0 |
| | MEDIA ADVERTISEMENT Candidate Name | | |
| | DWIGHT MARK ANTHONY YOUNG | Category | / Memo Item |
| | Office Sought: House Disbursement For: | Туре | |
| | X Senate Y Primary | General | |
| | | pecify) ▼ | |
| _ | State: FL District: | | |
| _ | Full Name (Last, First, Middle Initial) | | Date of Diet |
| ⊘ | KABOOM | | Date of Disbursement |
| Ŋ | Mailing Address | | 0_8 |
| M | 456 SW 14TH COURT City State Zip | Code | |
| 46 | | 060 | Amount of Each Disbursement this Period |
| М | Purpose of Disbursement | | 3.5.8,2,8 |
| 0 | CAMPAIGN T-SHIRTS | | |
| 20 | Candidate Name | Category/ | Memo Item |
| Ö | DWIGHT MARK ANTHONY YOUNG Office Sought: House Disbursement For: | Туре | |
| O) | X Senate Primary | General | |
| | President Other (sp | ecify) _ | |
| (<u> </u> | State: District: | · | |
| do | UBTOTAL of Disbursements This Page (optional) | | 1 1 8 3 2 8 |
| Ь | OTAL This Period (last page this line number only) | | > |

FOR LINE NUMBER: PAGE 3 OF SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the X | 17 18 19b 19a Detailed Summary Page 20b 20c Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) CAMPAIGN FOR DWIGHT YOUNG U.S. SENATE Full Name (Last, First, Middle Initial) **Date of Disbursement IHEART MEDIA** Mailing Address 9549 KOGER BLVD N, STE 200 State Zip Code Amount of Each Disbursement this Period ST. PETERSBURG 33702 FL Purpose of Disbursement 1 3 6 0 0 0 MEDIA ADVERTISEMENT Candidate Name Memo Item Category/ **DWIGHT MARY ANTHONY YOUNG** Type Office Sought: Disbursement For: House Senate Primary General President Other (specify) State: FL District: Full Name (Last, First, Middle Initial) Date of Disbursement **ENTERPRISE RENT-A-CAR** Mailing Address 24141 US HIGHWAY 19 N City State Zip Code Amount of Each Disbursement this Period **CLEARWATER** FL 33765 Purpose of Disbursement 3,2,5,0,0 TRAVEL EXPENSE - CAR RENTAL Candidate Name Memo Item Category/ **DWIGHT MARK ANTHONY YOUNG** Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: FL Full Name (Last, First, Middle Initial) Date of Disbursement C. M Mailing Address M M City State ω Zip Code Amount of Each Disbursement this Period ব Purpose of Disbursement M 0 Candidate Name \odot Memo Item Category/ Туре 2 0 Office Sought: House Disbursement For: တ Senate Primary General Other (specify) President ∞ State: District:

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SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

| CHEDULE C (FEC Form 3) OANS | Use separate schedule(s) for each category of the Detailed Summary Page PAGE 1 OF FOR LINE NUMBER: (check only one) |
|---|--|
| NAME OF COMMITTEE (In Full) CAMPAIGN FOR DWIGHT YOUNG U.S. SENATE | |
| LOAN SOURCE Full Name (Last, First, Middle Initia | al) |
| DWIGHT MARK ANTHONY YOUNG - PERS | C well C |
| Mailing Address | General |
| 2008 SUNSET GROVE LN | Other (specify) ▼ |
| City State | ZIP Code |
| CLEARWATER FL | 33765 |
| Original Amount of Loan Cumula | ative Payment To Date Balance Outstanding at Close of This |
| 2,0,0,0,0 | The state of the s |
| TERMS Date Incurred | 2,0,0,0 |
| | Date Due Interest Rate Secured: |
| 0.5 2.7 2.0 1.6 MM | NONE (apr) |
| List All Endorsers or Guarantors (if any) to Loan 5 | Source |
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| DWIGHT MARK ANTHONY YOUNG Mailing Address | PINELLAS CTY SHERIFF OFFICE |
| - | Occupation DETENTION DEPUTY |
| 2008 SUNSET GROVE LN | Amount |
| City State ZIP C CLEARWATER FL 3376 | |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| | Amount |
| City State ZIP Co | |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| | Amount |
| City State ZIP Co | ode Guaranteed |
| 4. Full Name (Last, First, Middle Initial) | Outstanding: |
| Mailing Address | Occupation |
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| City State ZIP Co | Amount Guaranteed |
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| | CHEDULE C (FEC Form 3) DANS | | for each | rate schedule(s) category of the Summary Page | PAGE 2 OF 6 FOR LINE NUMBER: (check only one) 13a 13b |
|--------|---|---------------------------------------|-------------------------------------|---|---|
| F | AME OF COMMITTEE (In Full) CAMPAIGN FOR DWIGHT YOUNG U.S. | SENATE | | | |
| | LOAN SOURCE Full Name (Last, First, M | liddle Initial) | | Memo Item Ele | ection: |
| | DWIGHT MARK ANTHONY YOUNG | - PERSONAL FI | JNDS | | Primary General |
| | Mailing Address 2008 SUNSET GROVE LN | | | | Other (specify) ▼ |
| | City | | ZIP Code | | |
| | CLEARWATER | FL | 33765 | | |
| | Original Amount of Loan | Cumulative Payri | | | Outstanding at Close of This Period |
| | 1, 1, 0, 0, 0, 0, 0 | · · · · · · · · · · · · · · · · · · · | <u>, 0</u> , 0 | | 1 1 0 0 0 0 0 0 |
| | TERMS Date Incurred | Da | te Due | Interest Rate | Secured: |
| | 0 7 1 9 2 0 1 6 | M M / D D | / <u> </u> | NONE | % (apr) Yes X No |
| | List All Endorsers or Guarantors (if any) | to Loan Source | | | |
| | Full Name (Last, First, Middle Initial) DWIGHT MARK ANTHONY YOUNG | | Name of Em | | |
| | Mailing Address | | UNEMPL Occupation | OYED | |
| | 2008 SUNSET GROVE LN | | UNEMPLO | OYED | |
| | City State | ZIP Code | Guaranteed Outstanding | 3 | 1 1 0 0 0 0 0 |
| | CLEARWATER FL 2. Full Name (Last, First, Middle Initial) | 33765 | Name of Em | | |
| | Mailing Address | | Occupation | | |
| | | | Amount | | |
| | City State | ZIP Code | Guaranteed Outstanding | - | 9) 4 4 4 4 |
| | 3. Full Name (Last, First, Middle Initial) | · · · · · · · · · · · · · · · · · · · | Name of Em | ployer | |
| ۲Ù | Mailing Address | | Occupation | | |
| Ŋ | | | Amount | | |
| 60 | City State | ZIP Code | Guaranteed Outstanding | | (3) |
| Й 4 | 4. Full Name (Last, First, Middle Initial) | | Name of Em | ployer | - |
| 0 | Mailing Address | | Occupation | | |
| 902 | City State | ZIP Code | Amount Guaranteed Outstanding | 9 | |
| S D's | UBTOTALS This Period This Page (optional |) | | > [| 1 1 0 0 0 0 0 |
| | OTALS This Period (last page in this line or | nly) | | _ <u> </u> | |
| 4 | Carry outstanding balance only to LINE 3. S. | abadula D. for this | line If no Schedule | D. carny forward | to appropriate line of Summary |

| OANS | | for ea | separate schedule(s) ach category of the ed Summary Page | FOR LINE NUMBER: (check only one) |
|--|-------------------|-------------------------------|--|-----------------------------------|
| NAME OF COMMITTEE (In Full) | | | ou commany rage | 1 |
| CAMPAIGN FOR DWIGHT YOUNG U.S. | | | | |
| LOAN SOURCE Full Name (Last, First, M | liddle Initial) | | - Monto ttetti | ction: |
| DWIGHT MARK ANTHONY YOUNG | - PERSONAL FUN | IDS | x | Primary General |
| Mailing Address 2008 SUNSET GROVE LN | | | | Other (specify) ▼ |
| City | State ZIP | Code | | |
| CLEARWATER | FL 33 | 765 | | |
| Original Amount of Loan | Cumulative Paymen | t To Date | Balance C | Outstanding at Close of This Pe |
| 5.0.0.00 | | 0 | 0.0 | 5000 |
| TERMS Date Incurred | Date D | Due | Interest Rate | Secured: |
| 0.7 1.9 / Y Y Y Y Y Y Y Z 0.1.6 | M M / D D / | Y * Y * Y | NONE | |
| List All Endorsers or Guarantors (if any) | to Loan Source | | | |
| 1. Full Name (Last, First, Middle Initial) | | Name of I | Employer | |
| DWIGHT MARK ANTHONY YOUNG | | 1 | PLOYED | |
| Mailing Address | | Occupatio | n | |
| 2008 SUNSET GROVE LN | | UNEMP | LOYED | |
| City State | ZIP Code | Guarantee | - | 5 0 0 0 0 |
| CLEARWATER FL 2. Full Name (Last, First, Middle Initial) | 33765 | Outstandir | | <u> </u> |
| | | Name of E | =mployer | |
| Mailing Address | | Occupation | n | - |
| City State | | Amount | | |
| City State | ZIP Code | Guarantee Outstandin | | |
| 3. Full Name (Last, First, Middle Initial) | _ | Name of E | Employer | |
| Mailing Address | | Occupation | n | |
| City State | ZIP Code | Amount Guaranteed | | |
| 4. Full Name (Last, First, Middle Initial) | | Outstandin Name of E | | |
| Mailing Address | | | | |
| | | Occupation | 1 | |
| City State | ZIP Code | Amount Guaranteed Outstanding | 4 - | 3 2 |
| JBTOTALS This Period This Page (optional) | | | — | ,5 0 0 <u>0</u> 0 0 |

PAGE 4 SCHEDULE C (FEC Form 3) OF 6 Use separate schedule(s) FOR LINE NUMBER: LOANS for each category of the (check only one) X 13a Detailed Summary Page 13b NAME OF COMMITTEE (In Full) CAMPAIGN FOR DWIGHT, YOUNG U.S. SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: ☐ Memo Item DWIGHT MARK ANTHONY YOUNG - PERSONAL FUNDS X Primary General Mailing Address Other (specify) 2008 SUNSET GROVE LN City State ZIP Code **CLEARWATER** FL 33765 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5_0_0_0_0 0_00 <u>5 0 0 0 0</u> **TERMS** Date Incurred **Date Due** Interest Rate Secured: NONE Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer DWIGHT MARK ANTHONY YOUNG UNEMPLOYED Mailing Address Occupation UNEMPLOYED 2008 SUNSET GROVE LN Amount City State ZIP Code Guaranteed 5_0_0_0_0 CLEARWATER Outstanding: FL 33765 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount City State ZIP Code Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation **Amount** City State ZIP Code Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount City State ZIP Code Guaranteed Outstanding: SUBTOTALS This Period This Page (optional)... TOTALS This Period (last page in this line only) ...

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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| CHEDULE C (FEC Form 3) OANS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) X 13a 13b |
|--|-----------------------|---|--|
| IAME OF COMMITTEE (In Full) CAMPAIGN FOR DWIGHT YOUNG U.S. | SENATE | | |
| LOAN SOURCE Full Name (Last, First, Mi | ddle Initial) | ☐ Memo Item E | lection: |
| DWIGHT MARK ANTHONY YOUNG | - PERSONAL FUNDS | | Primary General |
| Mailing Address 2008 SUNSET GROVE LN | | | Other (specify) 🔻 |
| City | State ZIP Cod | de | |
| CLEARWATER | FL 33765 | | |
| Original Amount of Loan | Cumulative Payment To | Date Balance | Outstanding at Close of This Period |
| TERMS Date Incurred | Date Due | Interest Rate | Secured: |
| 0 7 2 6 7 2 0 1 6 | M M / D D / Y | Y Y Y NONE | % (apr) Yes X No |
| List All Endorsers or Guarantors (if any) | to Loan Source | N | |
| Full Name (Last, First, Middle Initial) DWIGHT MARK ANTHONY YOUNG | | Name of Employer UNEMPLOYED | |
| Mailing Address | | Occupation | |
| 2008 SUNSET GROVE LN | - | UNEMPLOYED Amount | |
| City State CLEARWATER FL | ZIP Code 33765 | Guaranteed Outstanding: | 2,0000,00 |
| 2. Full Name (Last, First, Middle Initial) | | Name of Employer | |
| Mailing Address | | Occupation | |
| City State | ZIP Code | Amount Guaranteed Outstanding: | (2) |
| 3. Full Name (Last, First, Middle Initial) | | Name of Employer | |
| Mailing Address | | Occupation | |
| | | Amount | * * * * * * * * * * * * * * * * * * * |
| City State | ZIP Code | Guaranteed Outstanding: | <u> </u> |
| 4. Full Name (Last, First, Middle Initial) | | Name of Employer | |
| Mailing Address | | Occupation | |
| City State | ZIP Code | Amount Guaranteed Outstanding: | |
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Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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| SCHEDULE C (FEC Form 3) LOANS | | Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 6 OF 6 FOR LINE NUMBER: (check only one) X 13a 13b | |
|--|-------------------------|---|---|--|
| NAME OF COMMITTEE (In Full) CAMPAIGN FOR DWIGHT YOUNG U.S. SE | ENATE | | | |
| LOAN SOURCE Full Name (Last, First, Midd | lle Initial) | ☐ Memo Item Ele | ction: | |
| DWIGHT MARK ANTHONY YOUNG - I | PERSONAL FUNDS | x | Primary General | |
| Mailing Address 2008 SUNSET GROVE LN | | | Other (specify) | |
| City | State ZIP Code | е | | |
| CLEARWATER | FL 33765 | | | |
| Original Amount of Loan | Cumulative Payment To D | Date Balance | Outstanding at Close of This Period | |
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| TERMS Date Incurred | Date Due | Interest Rate | Secured: | |
| 0 8 ' 0 1 ' 2 0 1 6 M | M / D D / Y | NONE | % (apr) Yes X No | |
| List All Endorsers or Guarantors (if any) to | | | | |
| Full Name (Last, First, Middle Initial) DWIGHT MARK ANTHONY YOUNG | | Name of Employer UNEMPLOYED | | |
| Mailing Address | | Occupation | | |
| 2008 SUNSET GROVE LN | <u>.</u> | UNEMPLOYED Amount | | |
| City State | ZIP Code | Guaranteed | 2 0 0 0 0 0 | |
| CLEARWATER FL | 33765 | Outstanding: | 3) | |
| 2. Full Name (Last, First, Middle Initial) | | Name of Employer | | |
| Mailing Address | | Occupation | | |
| | | Amount | | |
| City State | ZIP Code | Guaranteed Outstanding: | <u> </u> | |
| 3. Full Name (Last, First, Middle Initial) | | Name of Employer | | |
| Mailing Address | | Occupation | | |
| ហ [| | Amount | | |
| Μ City State | ZIP Code | Guaranteed Outstanding: | <u> </u> | |
| 4. Full Name (Last, First, Middle Initial) | | Name of Employer | | |
| Mailing Address | | Occupation | | |
| City State | ZIP Code | Amount Guaranteed Outstanding: | | |
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| Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary. | | | | |

Information found on LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS of Schedule C Federal Election Commission, Washington, D.C. 20463 NAME OF COMMITTEE (In Full) **FEC IDENTIFICATION NUMBER** LENDING INSTITUTION (LENDER) Amount of Loan interest Rate (APR) Full Name Mailing Address Date Incurred or Established City State Zip Code Date Due A. Has loan been restructured? No If yes, date originally incurred B. If line of credit, Total Outstanding Amount of this Draw: Balance: C. Are other parties secondarily liable for the debt incurred? (Endorsers and guarantors must be reported on Schedule C.) What is the value of this collateral? D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? No Yes If yes, specify: Does the lender have a perfected security interest in it? No E. Are any future contributions or future receipts of interest income, pledged as What is the estimated value? collateral for the loan? No Yes If yes, specify: Location of account: A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Address: Date account established: 0 D City, State, Zip: If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment. Ç, Ø G. COMMITTEE TREASURER DATE コ Typed Name 2003 Signature Attach a signed copy of the loan agreement. TO BE SIGNED BY THE LENDING INSTITUTION: Œ, To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan σ are accurate as stated above. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for ¢¢ similar extensions of credit to other borrowers of comparable credit worthiness. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has Œ complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan. AUTHORIZED REPRESENTATIVE DATE (E)ped Name Title (Signature

Supplementary for

SCHEDULE C-1 (FEC Form 3)

schedule(s) FOR LINE NUMBER: DEBTS AND OBLIGATIONS (check only one) for each 9 numbered line) 10 **Excluding Loans** NAME OF COMMITTEE (In Full) Nature of Debt (Purpose): A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mailing Address Zip Code City State Outstanding Balance Beginning This Period Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period Nature of Debt (Purpose): B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mailing Address Zip Code City State Outstanding Balance Beginning This Period Outstanding Balance at Close of This Period Payment This Period Amount Incurred This Period C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address State Zip Code City Outstanding Balance Beginning This Period M ø ব Outstanding Balance at Close of This Period Payment This Period Amount Incurred This Period M 0 9 SUBTOTALS This Period This Page (optional) .. ~ ≪ TOTALS This Period (last page this line number only)... TOTAL OUTSTANDING LOANS from Schedule C (last page only)... ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE

FEC Schedule D (Form 3) (Revised 02/2003)

(Use separate

OF

SCHEDULE D (FEC Form 3)

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee) Name of Principal Campaign Committee (In Full) Report Covering Period: From: (a) Line No. 11(a) Line No. 11(b) Committee Name **Total Contributions From Total Contributions** Indiv./Persons Other Than From Political Party Political Committees Committees Column Total Last Page Only..... (d) (e) (h) (q) Line No. 11(d) Line No. 11(c) Line No. 11(e) Line No. 12 Line No. 13(a) Line No. 13(b) **Total Contributions** Total Contributions Total **Total Transfers** Total Loans Made or Total All From Other Political From The Contributions From Other Authorized Guaranteed by Other Loans Committees Candidate Committees the Candidate (i) **(I)** (m) (n) Line No. 13(c) Line No. 14 Line No. 15 Line No. 16 Line No. 17 Line No. 18 Total Total Offsets to Total Total Total Total Transfers to Loans Operating Other Receipts Operating Other Authorized Expenditures Receipts Expenditures Committees (o) Line No. 19(a) (s) Line No. 20(b) (q) Line No. 19(b) Line No. 19(c) Total Loan Repayments of Loans Made or Line No. 20(a) Line No. 20(c) Total Loan Repayments Total Loan **Total Contribution Total Contribution** Total Contribution of All Other Loans Repayments Guaranteed by The Can-Refunds to Refunds to Political Refunds to Other didate Individuals/Persons Party Committees Political Committees (u) (x) (y) (z) Line No. 20(d) Line No. 22 Line No. 21 Line No. 23 Line No. 27 Line No. 9 Total Total Other Total Cash on Hand Cash on Hand Debts & Obligations SV ZUUC Contribution Disbursements Disbursements Beginning of Close of Owed TO the Refunds Reporting Period Reporting Period Committee (aa) (bb) (cc) Line No. 10 Line No. 6(c) Line No. 7(c) Debts & Obligations **Net Contributions Net Operating** Owed BY the Expenditures Committee

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CLEARWATER, FL 33765













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DANA K, MACCALLUM SUPERINTENDENT

HART SENATE OFFICE BUILDING SUITE 232

United States Senate

OFFICE OF THE SECRETARY

WASHINGTION, DC 20510-7116 PHONE(202) 224-0322

OFFICE OF PUBLIC RECORDS

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